04-24-09



Attorney Docket No.: 20239/0202826-US0

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Fee Transmittal (1 page)

Two Month Request for Extension of Time Under 37 CFR 1.136(a)

Request for Continued Examination Transmittal (1 page)

Amendment Transmittal

First Preliminary Amendment (11 pages)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE ork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number MOBIN Complete if Known Effective on 12/08/2004. 10/554,188-Conf. #2644 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number FEE TRANSMITTAL October 21, 2005 Filing Date First Named Inventor Natsuo Tatsumi For FY 2009 Examiner Name E. Breval Applicant claims small entity status. See 37 CFR 1.27 2889 Art Unit 20239/0202826-US0 TOTAL AMOUNT OF PAYMENT 1,300.00 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): x Deposit Account Deposit Account Number. 04-0100 Darby & Darby P.C. Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below, except for the filing fee x Charge fee(s) indicated below Charge any additional fee(s) or underpayments of x | Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES EXAMINATION FEES Small Entity** Small Entity Small Entity **Application Type** Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) <u>Fee (\$)</u> 330 Utility 165 540 270 220 110 Design 220 110 100 50 140 70 Plant 220 110 330 165 170 85 330 165 270 Reissue 540 650 325 Provisional 220 110 0 0 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 52 26 Each independent claim over 3 (including Reissues) 220 110 Multiple dependent claims 390 195 **Total Claims** Fee Paid (\$) **Multiple Dependent Claims** Extra Claims - 24 or HP Fee Paid (\$) Fee (\$) HP = highest number of total claims paid for, if greater than 20. Fee Paid (\$) Indep. Claims Extra Claims - 3 or HP = HP = highest number of independent claims paid for, if greater than 3.

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3. APPLICATION SIZ	E FEE				
If the specification a	and drawings exceed	d 100 she	ets of paper (excluding electronically filed	sequence o	r computer
listings under 37	CFR 1.52(e)), the a	pplicatio	n size fee due is \$270 (\$135 for small entity	y) for each	additional 50
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Total Sheets	Extra Sheets	Num	ber of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
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4. OTHER FEE(S)	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37	810.00
1252 Extension for response within second month	490.00
SUBMITTED BY	

SUBMITTED BY							
Signature	X	lead	Registration No. (Attorney/Agent)	44,528	Telephone	(212) 527-7700	
Name (Print/Type)	Thomas J.	Bean			Date	April 22, 2009	

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AME! Application	NDMENT 7	ΓRANSMI	TTAL LE	TTER	Docket No. 20239/0202826-US
		Filing Date Examiner October 21, 2005 E. Breval			Art Unit
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Independent Claims	2	- 3 =		x	
Multiple Depend	dent Claims (ch	eck if applicabl	e)	··	
Other fee (pleas	se specify): C			tion (RCE) (see 37 onse within second	1,300.00
TOTAL ADDIT	IONAL FEE FO	OR THIS AME	NDMENT:		1,300.00
X Please char	al fee is require	count No	04-0100 ir	Small Entity the amount of \$ _ the filing fee is encl	1,300.00